



## State of Maryland

### Advisory Council on Mental Hygiene/Planning Council

Lawrence J. Hogan, Jr., Governor – Boyd K. Rutherford, Lt. Governor – Van T. Mitchell, Secretary, DHMH

## MARYLAND ADVISORY COUNCIL ON MENTAL HYGIENE/ PL 102-321 PLANNING COUNCIL

### Minutes

January 20, 2015

**Maryland Advisory Council Members:** Gerald Beemer, M. Sue Diehl, Vice Chair; Mike Finkle, Dennis McDowell, Joanne Meekins, Livia Pazourek, Robert M. Pender, Charles Reifsnider, Anita Solomon, John Turner

**Maryland Advisory Council Members Absent:** Richard Blair, Jaimi L. Brown, Sarah Burns, Chair; Michele Forzley, Joshana Goga, Edwin C. Oliver, John Scharf, Sherrie Wilcox

Individuals highlighted as such are resigned members who have not yet been replaced.

**PL 102-321 Council Members Present:** Robert Anderson, Karyn M. Black, Naomi Booker, Chicquita Crawford (by phone), Herb Cromwell, Jan Desper, Kate Farinholt, Nancy Feeley, A. Scott Gibson, Dayna Harris, Julie Jerscheid, Dan Martin, Alexis Moss, Ebele Onwueme (by phone), Cynthia Petion, Michelle Stewart, Kathleen Ward, Phoenix Woody

**PL 102-321 Council Members Absent:** Lynn Albizo, T.E. Arthur, Coordinator; Anne Blackfield, Michael Bluestone, Vira Froehlinger, Ann Geddes, Sharon Lipford, George Lipman, Jacqueline Powell, Linda Raines, Sheryl Sparer, Crista Taylor

**BHA Staff Present:** Brian Hepburn, Lisa Hadley, Thomas Merrick, Robin Poponne, Iris Reeves, Brandee Izquierdo, Hilary Phillips, Greta Carter

### **Guests and Others:**

Jennifer Tuerke, ValueOptions@Maryland; Stephanie Clark, ValueOptions@Maryland; Vernon Spriggs (by phone); Jessica Honke, NAMI MD; Agnes Balla, Medicaid Services; Gail Stansberry, Consumer; Cyntrice Bellamy, Behavioral Health Administration; Carlos Hardy, State Drug and Alcohol Abuse Council

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c/o Behavioral Health Administration

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**Healthy People in Healthy Communities**

### **INTRODUCTIONS/ADOPTION OF MINUTES:**

The meeting was called to order by Council Vice Chair, Sue Diehl. Attendees introduced themselves. The draft minutes of the November 18, 2014 meeting were approved. Please note that the approved minutes will be posted on the Behavioral Health Administration's (BHA) Web site at <http://bha.dhmh.maryland.gov/>. The Maryland Advisory Council's webpage on BHA's Web site is listed on the homepage under "Welcome to the Behavioral Health Administration" under "Mental Health Council".

### **ANNOUNCEMENTS:**

- Cynthia Petion thanked everyone who participated in the monitoring site visit for the federal Community Mental Health Block Grant (MHBG). At the exit conference the monitors said they were impressed by the participation of stakeholders from the state as well as other collaborative partnerships that contribute toward the successful efforts of Maryland's behavioral health system of care. The visit was part of a rotation round of reviews conducted in all states that receive the MHBG. Maryland usually receives a monitoring visit every 3-5 years. The general purpose of the visit is to monitor the expenditure of the MHBG funds and to evaluate the State's compliance with the agreements required within the program.
- Dan Martin announced the 2015 Maryland Behavioral Health Coalition Rally will be held at the State House in Annapolis, Wednesday, February 25<sup>th</sup>, from noon-1pm. Mr. Martin also stated that the Mental Health Association of Maryland's (MHAMD's) 2015 Legislative Reception and Briefing will be held on February 12<sup>th</sup> at the Loews Annapolis Hotel, keynote by Doris Kearns Goodwin. This year MHAMD will present the Paula Hamburger Award, honoring a champion for children, to Albert Zachik, M.D. and the Distinguished Service Award, honoring visionary leadership and lasting impact, to Brian Hepburn, M.D. For more information on both events please contact MHAMD at 443-901-1550 ext. 208 or visit <http://mhamd.org/>.
- NAMI Maryland is having their Advocacy Day on Thursday, January 29<sup>th</sup>, from 8:00am to 3:00pm in Annapolis. For more information please visit NAMI Maryland's Web site at <http://www.namimd.org/>.

### **THE DIRECTOR'S REPORT:**

BHA's Executive Director, Brian Hepburn, M.D., provided the following Director's Report:

#### **Changes in Maryland Government:**

Maryland's a new Governor, Larry Hogan will be sworn in on January 21<sup>st</sup>. DHMH will have a new Secretary, Van Mitchell. Secretary Mitchell served as Deputy Secretary under Secretary Anthony McCann from 2004 to 2007.

#### **Budget:**

The Behavioral Health Administration (BHA) will be getting a new Legislative Budget Analyst. Simon Powell, who has been the Analyst for 15 years, has been promoted and will supervise the new Analyst. The new Analyst will be faced with challenges in the BHA's budget such as the increase in service utilization with Medicaid expansion in place. Also, when the Analyst looks at the BHA budget, it will look as though there was

an increase in State dollars. However, the increase is not in the State dollars but a result of the higher Federal match due to the MA expansion. One of the things BHA would have to work on with the analyst is understanding that as the Medicaid population increases, it means an increase in the need for state funding to support that population that needs more than services only covered by Medicaid. Medicaid covers only healthcare but it does not cover recovery support services, such as housing. For example, due to the MA expansion, many of the individuals who were previously in the uninsured category are now in the Medicaid category. If you take away the funding that was going towards the uninsured, you'll continue to have people who will need high level Medicaid services because they don't have recovery supports such as housing. Lack of state funded recovery support services often translates into higher level (and higher cost) of Medical Assistance services. Also, if funding appears available because individuals are being moved from uninsured to Medicaid, then this funding can easily become a target for cuts. The legislature needs to know that these funds should be protected to assist people to receive services beyond healthcare services.

The Board of Public Works agreed to changes for the 2015 budget. Effective January 1<sup>st</sup> there will be an across-the-board two percent cut to the state's budget. These are midyear changes that will impact the budget plans of providers. At this time the BHA are not aware of any other budget cuts for FY 2015.

The 2016 budget has not been presented. There will be no salary increases or rate increases. There may be cost containment measures implemented.

The Behavioral Health Administration's budget hearings will be held in the House on February 25<sup>th</sup> and in the Senate March 6<sup>th</sup>.

**Update on the Administrative Services Organization - ValueOptions:**

The new Administrative Services Organization (ASO) contract with ValueOptions is effective as of January 1, 2015. The new contract is expanded to include both Mental Health and Substance Use disorders. Everything is going relatively smoothly. Individuals are continuing to get services and providers are getting paid. There were some glitches but they have been resolved.

Lisa Hadley, M.D. added that the first major change, in addition to substance use disorders being under the ASO, is that ValueOptions contract is no longer with the Behavioral Health Administration (BHA) but with Medicaid. BHA is working very closely with Medicaid on the contract. The department has made daily calls to ValueOptions to monitor how quickly issues are being resolved. Providers are being encouraged to contact ValueOptions with any questions or concerns that they may have. There are a variety of provider training schedules posted on their Web site. For more information please visit <http://maryland.valueoptions.com/>.

**PRESENTATION – UPDATE ON 1915(i) AND OTHER INITIATIVES FOR CHILD AND ADOLESCENT SERVICES – Thomas Merrick, Office of Child and Adolescent Services, BHA**

Mr. Merrick gave an update on two initiatives for child and adolescent services:

**The 1915(i) State Plan Amendment (SPA):**

The 1915(i) State Plan Amendment (SPA) is a new program that just started as a result of the Affordable Care Act. It is intended to expand all home and community based services beyond what states could deliver under previous community-based programs such as 1915(c) or RTC Retooling.

For children who are enrolled in the SPA, an assortment of specialized services, not available to all Medicaid recipients, will be offered. These include: respite care, family peer support, intensive in-home services, crisis and stabilization services, expressive and experiential therapies such as art or music or equine assisted therapy, and a unique program of participant directed customized goods and services.

The SPA will provide intensive care coordination through a new Medicaid provider type called a Care Coordination Organization using a wraparound practice approach. Additional levels of this new care coordination program will also be available to any Medicaid eligible child or adolescent and not only those enrolled in the SPA.

The SPA was recently approved by CMS, the effective date of the program is October 1, 2014 and must be reapproved by CMS after a five year period has elapsed. Funds will be dispersed on a County by County basis. County funding has not yet been approved. This process will begin January 1, 2015.

Children, adolescents and their families who are Medicaid eligible and have an income that is below 150 percent of the federal poverty line, are eligible for the 1915(i) State Plan Amendment (SPA). The young person must meet the RTC level of care or have a recent history of multiple psychiatric hospitalizations to be eligible. A screening tool called the CASII will be piloted in determining eligibility.

This tight financial eligibility criteria poses a problem in designing the program, because it cuts off at 150 percent of the federal poverty line which is only half way to what Maryland covers which is 300 percent. In designing the program, it actually started as one program (1915(i)) but grew into two separate, distinct initiatives (see Targeted Case Management below).

**Targeted Case Management just for Children and Youth:**

In looking at the problem of limiting services at a 150 percent of the federal poverty line, the idea emerged of doing a separate targeted case management program that would be available for any child that is eligible, who met the medical necessity criteria up to 300 percent and has a Medicaid card. The targeted case management has become a bigger system development than the 1915(i) SPA and is already being implemented in selected counties across the state. Please see attachment.

**COUNCIL BUSINESS/UPDATES:**

Cynthia Petion announced that the State Drug and Alcohol Abuse Council and the Maryland Mental Health Advisory Council are planning a retreat on March 17, 2015 at the Meeting House in Columbia, MD. The purpose of the meeting is to work on by-laws for the committee structures and the structure for the Behavioral Health Advisory Council.

It was announced that the Council will need two people to give testimony at the BHA budget Hearings in Annapolis in February and March. The Senate Budget Hearing will take place on February 25<sup>th</sup> at 1:00 pm and the House Hearing will take place on March 6<sup>h</sup> at 1:00 pm. People who previously testified described the process and gave advice. John Turner volunteered and one more member will be invited to participate. You may contact Robin Poponne at [robin.poponne@maryland.gov](mailto:robin.poponne@maryland.gov) or at 410-402-8473 if you would like to participate.

The meeting was adjourned.